

Quality Procedure (QP) Interim Change Notice (ICN)

Effective Date: **10/03/03**

5 Page(s)

Section 1: Description of Change (Requester completes)		1. Document Catalog No.: ER2003-0598
2. QP & Rev. No.: 3.5, R1	3. ICN No.: 2	4. QP Title: Peer Review Process
5. Description of Change: Add the following to 4.0 PROCEDURES: 4.6 Accelerated Review/Approval Process with Pending Comments If a document defined as requiring a peer review (see QP-4.9), requires an accelerated review and approval <u>due to time constraints only</u> , implement the following process. Reference Attachment D, Accelerated Review and Approval Process with Pending Comments, for a pictorial view of the following process. 4.6.1 If all reviewer comments are not resolved <u>due to time constraints only</u> , the author shall check the box, "Not all comments resolved; attach this Form to Document Signature Form," on the Peer Review (PR) Comment Form (Attachment B), Part 3, following the signature line. 4.6.2 The peer review chair or technical reviewer , as applicable, shall check the field, "Comments Pending," after the approval signature on the Document Signature Form, prior to forwarding PR Comment Forms to the peer review coordinator or author, as applicable. 4.6.3 The author shall ensure the attachment of all "unresolved" PR Comment Forms to the Document Signature Form and thus the final document before approval signature by the RRES-RS Deputy Project Director. 4.7.4 The author shall ensure the transmittal of "unresolved" PR Comment Forms with the records package according to QP-4.9. Replace Attachment B, Peer Review Comment Resolution Form, with the new Attachment B (see attachment). Replace Attachment C, Peer Review Comments/Resolution Instructions, with new Attachment C (see attachment). Add Attachment D, Accelerated Review and Approval with Pending Comments Process Flow Chart.		
6. Attachments Modified, Added, or Removed: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
7. ICN Justification: To improve the peer review process, the RRES-RS Project needed to define a fast-track review process for documents requiring a review in 30 days or less.		
8. Requester: <u>Dave McInroy</u> [Signature on File] (Print name, then sign.)		<u>10/03/03</u> (Date)
Section 2: Evaluation and Approval (PTL, Technical Reviewer, and QPPL complete.)		
9. Evaluation Remarks: (If none, enter N/A) N/A		
10. Project Team Leader: <u>Larry Maassen</u> [Signature on File] (Print name, then sign.)		<u>10/02/03</u> (Date)
11. Technical Reviewer: <u>Cheri Vidlak</u> [Signature on File] (Print name, then sign.)		<u>10/02/03</u> (Date)
12. QPPL: <u>Larry Maassen</u> [Signature on File] (Print name, then sign.)		<u>10/02/03</u> (Date)
QP-4.1, R5		Los Alamos National Laboratory RRES-Remediation Services Project

[Using a token card, click here to record "self-study" training to this procedure.](#)

If you do not possess a token card or encounter problems, contact the RRES-ECR training specialist.

Attachment B: Peer Review Comment Form

Page 1 of 3

Part 1 (Peer Review (PR) Coordinator or author complete, as appropriate.)

Date: _____

Title: _____ Rev. #: ____ Doc. Catalog No: **ER200** - ____

Reviewer's Name (Print): _____ Organization: _____ Comments due by: _____ (Date)

Author: _____ Phone: _____ E-Mail: _____

Return forms to PR Coordinator: _____ Phone: _____ E-Mail: _____

Part 2 (Reviewer Completes)

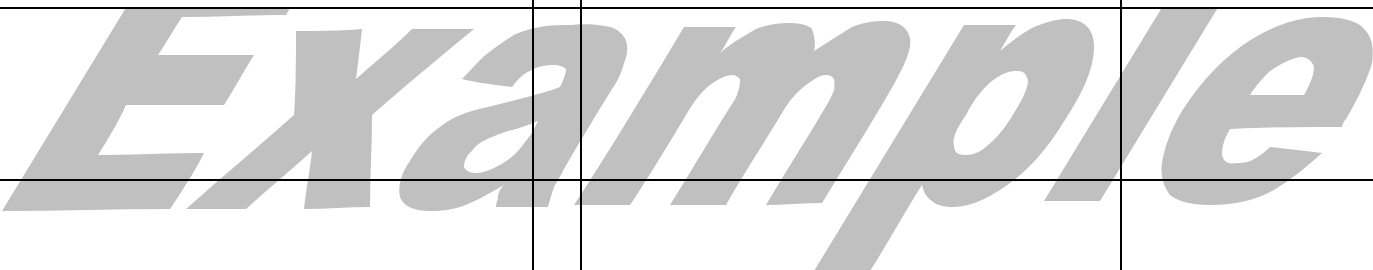
Date Received: _____ Date Review Completed: _____

Signature & Date: _____

Part 3 (If under time constraints only, author completes.)

☐ Not all comments resolved; attach this Form to Document Signature Form.

Signature & Date: _____

Comment #	Location ¹	Reviewer's Comment/Suggestion	A/R ²	Author's Proposed Revision/Resolution	Final Resolution
					

This form is available online via a link in Section 7.0.

¹page, section #, paragraph/line

²A = Accept R = Reject

Attachment C: Peer Review Comment Form Instructions

Part 1: (Peer Review Coordinator and/or Author complete, as appropriate.)

- 1) **Date:** Enter Peer Review Comment Form (Comment Form), distribution date..
- 2) **Title:** Enter document title and revision number, if appropriate.
- 3) **Doc. Catalog No.:** Enter acquired Document Catalog Number (required before review).
- 4) **Reviewer's Name:** Print reviewer's name.
- 5) **Organization:** Enter reviewer's associated organization.
- 6) **Comments due by:** Enter due date for the return of all comment forms to Author and/or Peer Review Coordinator.
- 7) **Author's name:** Enter full name of document Author.
- 8) **Phone:** Enter Author's phone number.
- 9) **E-Mail:** Enter Author's e-mail address.
- 10) **PR Coordinator:** Enter full name of Peer Review (PR) Coordinator
- 11) **Phone:** Enter PR Coordinator's phone number.
- 12) **E-Mail:** Enter PR Coordinator's e-mail address.

Part 2: (Reviewer completes.)

- 1) **Date Received:** Enter date received electronic copy of the document requiring review and the Peer Review Comment Form.
- 2) **Date Review Completed:** Enter date the completed Peer Review Comment Form is submitted to the Peer Review Coordinator for compilation and transmittal to the author.
- 3) **Signature:** Sign and date the Peer Review Comment Form when review and resolution complete.
- 4) **Comment #:** Enter a sequential number for each new comment.
- 5) **Location:** Enter the comment location in the document (e.g., page 1, section 4.1.1 or paragraph 3, line 10).
- 6) **Reviewer's Comment/Suggestion:** Enter comment and/or suggestion.

Important: Do not enter statements and/or questions that do not enable the author to properly address the issue. In order for the author to effectively respond to the comment, provide an informative entry that addresses the issue completely (e.g.,

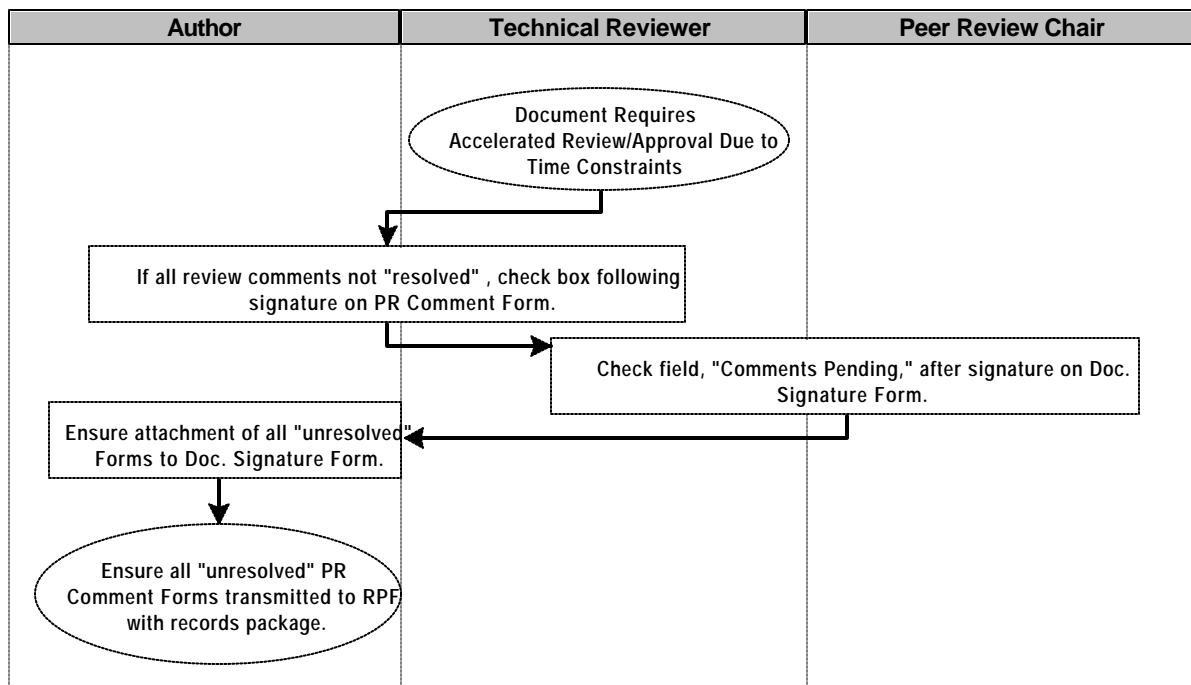
identify references that address the issue, name the oversight requirements which make a change necessary, enter a complete statement to justify editorial changes that are recommended, etc.).

- 7) **Accept/Reject (A/R):** After reviewing the comment and/or suggestion, the **Author** determines if the document requires revision in order to reflect the input. If the author accepts the comment and/or suggestion, the Author enters an “A” in this field, if the rejected, the Author enters “R,” document “why” in the next field, “Author’s Proposed Revision/Resolution.”
- 8) **Author’s Proposed Revision/Resolution** (see item 8): Enter resolution to the reviewer’s comment/suggestion if accepted (A) and a rejection reason if rejected (R).
- 10) **Final Resolution:** The **author** enters the agreed-upon resolution if reviewer requires more resolution to initially proposed resolution.

Part 3 (If under time constraints, Author completes.)

- 1) **Signature:** If under time constraints and the review form is not returned to the reviewer for resolution, the author signs and dates the Peer Review Comment Form.
- 2) **Check Box: “Not all comments incorporated; attach Form to Document Signature Form”:** Check this box if, due to document time constraints, not all comments are resolved and incorporated into the final document.

Attachment D: Accelerated Review and Approval with Pending Comments Process Flow Chart



Identifier:

QP-03.05

Revision:

1

Effective Date:

02/12/2001

ER Document Catalog Number: **ER2000-0618**

Author: **Cheri Vidlak**



**A Department of Energy
Environmental Cleanup Program**

Environmental Restoration Project Quality Procedure

for:

Peer Review Process

Los Alamos
NATIONAL LABORATORY

Los Alamos, New Mexico 87545

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Revision Log

<i>Revision (Date)</i>	<i>Prepared By</i>	<i>Description of Changes</i>	<i>Affected Pages</i>
R0 6/9/99	Kelly Black	New Procedure	All
R1 2/12/01	Cheri Vidlak	New Revision	All

Peer Review Process

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Peer Review Process

NOTE: ER Project personnel may produce paper copies of this procedure printed from the controlled-document electronic file located at http://erinternal.lanl.gov/home_links/Library_proc.htm . However, it is their responsibility to ensure that they are trained to and utilizing the current version of this procedure. The author may be contacted if text is unclear.

1.0 PURPOSE

This Quality Procedure documents the peer-review process for the Los Alamos National Laboratory (Laboratory) ER Project.

2.0 DEFINITIONS

- 2.1 Decision peer review— A review that occurs before document writing has begun, or at the key decision phase, and which focuses on the appropriateness of the stated objectives for the identified problem, adequacy of the proposed approach to address the objectives, and identification of concerns and necessary contingencies. This review will **only** be in the form of a panel review.
- 2.2 Document peer review— A review of a completed draft of a document which focuses on clarity of presentation and consistent, appropriate format and content in addition to approach. This review may be in the form of a panel review or a read review.
- 2.3 Panel review— A review that includes a meeting with the author and the reviewers for a discussion of the issues. May be a decision or document review.
- 2.4 Read review— A review of the written document that each reviewer conducts individually—without meeting as a group.
- 2.5 Peer review draft— The version of a document that is ready for peer review and includes a cover letter as described in Section 4.0 of QP-4.9, *Document Development and Transmittal Process: Peer Review Required*.

3.0 RESPONSIBLE PERSONNEL

The following personnel are responsible for activities identified in Section 4.0 of this procedure.

- 3.1 ER Project Team Leader.
- 3.2 Author

- 3.3 Reviewers (also identified as a peer review panel)
- 3.4 Peer Review Chairperson (chairperson)
- 3.5 Peer Review Task Leader
- 3.6 ESH-19 Resource Conservation and Recovery Act (RCRA) Compliance Specialist
- 3.7 Regulatory Compliance Deployed Personnel
- 3.8 Project Management Team

4.0 PEER REVIEW PROCEDURE

Note: The following basic procedure is used for all types of peer review.

4.1 Peer Review Request

- 4.1.1 The **ER Project team leader** requests a peer review by completing and electronically submitting the Peer Review Request Form [<http://erinternal.lanl.gov/Quality/forms.htm>] (Attachment A) to *er-peerreview@lanl.gov*. (The team leader need not submit this form personally if verbal approval for the request is provided to the peer review task leader.)

Note: All peer reviews will be conducted as either a convened panel review or a read review.

4.2 Peer Review Scheduling and Preparation

- 4.2.1 The **peer review task leader** assigns a panel chairperson and panel of reviewers with expertise in a variety of fields, which are pertinent to the decision/document.

- 4.2.2 The **peer review task leader** works with the requester and the chairperson to select an acceptable date and time for the review. Reviewers are contacted and their participation is requested.

Note: If Read Review, this date and time will be defined as the deadline when reviewer comments are due.

- 4.2.3 The **author** provides the document and a cover memo that identifies a brief set of issues, concerns, and basic information about the project, to the peer review task leader who distributes it, along with an electronic version of the Comment/Resolution Form (Attachment B), to each of the reviewers with at least one week to provide comments.

Note: If Decision Review, no document will be provided.

4.3 Review Proceedings

- 4.3.1 The **reviewers** each read the entire document, with a focus particularly (but not exclusively) on their area of expertise.
- Note:** If Read Review: If a **reviewer**, after reading the document, feels a panel review would be more appropriate, he may contact the peer review task leader or chairperson with reasons for this request. A panel review may be called in lieu of the read review.
- 4.3.2 **Reviewers** will record any concerns with the document on the Peer Review Comment/Resolution Form (Attachment B). It is preferable that the reviewers complete these forms electronically, but hard copies are also acceptable. When these forms are complete, the **reviewers** return them to the peer review task leader.
- Note:** All significant or mandatory comments on the document must be recorded on the Comment/Resolution Form to assure they are incorporated or addressed. Comments not entered onto the Comment/Resolution Form are not considered mandatory and therefore, the **author** is not required to address them. Editorial and less important comments may be recorded in the margins of the document and returned, along with the Comment/Resolution form, to the peer review task leader.
- 4.3.3 If **panel** review, the **chairperson** notes any recommendations or comments agreed to by the review panel on a Peer Review Comment/Resolution Form (Attachment B), or in a Peer Review Summary Report, and it will be distributed to the reviewers and authors within three workdays. If any **reviewers** or **authors** disagree with the contents of this summary report, they must raise their concerns to the chairperson within two workdays. The author must address and resolve all peer-review recommendations as they appear on the Comment/Resolution Form(s) and in the Peer Review Summary Report.
- Note:** Late comments will not be considered part of the formal peer review process without prior notification to and agreement by the peer review **chairperson**. If the schedule permits, the **author** will be encouraged to incorporate late comments where appropriate, but these will be outside of the formal process and will not require documentation of comment/resolution.
- 4.3.4 The **peer review task leader** will deliver all completed Comment/Resolution forms and marked-up documents to the author to address comments, a copy to the chairperson, and maintains copies for the peer-review files.

Note: The **author** will direct any questions concerning issues or comments to each individual reviewer.

4.4 Incorporate Peer Review Comments

4.4.1 The **author** must resolve or address all peer review recommendations as they appear on the Comment/Resolution Form(s) or Peer Review Summary Report.

4.4.2 When all comments have been incorporated, the **author** will submit a copy of the revised document and the completed Comment/Resolution forms to the **peer review task leader**.

4.4.3 The **peer review task leader** will deliver to each reviewer a copy of his/her Comment/Resolution form, complete with the author's responses.

Note: If the **reviewer** does not agree with responses from the author, and is not able to resolve a particular issue with the author, he should follow the Peer Review Comment Resolution Process as outlined in Section **4.5** of this QP.

4.4.4 The **peer review task leader** then submits a copy of the final revised document and completed Comment/Resolution forms to the chairperson for verification of comment incorporation.

4.4.5 Upon completion of this verification, the **chairperson** shall attest to the fulfillment of his or her responsibilities by signing the ER Project Document Signature form (see Section 4.1 of QP 04.09, Document Development and Transmittal Process: Peer Review Required) for this document in the appropriate space.

4.5 Comment Resolution Process

4.5.1 The **reviewer** contacts the author regarding comments that were rejected for unacceptable reasons.

4.5.2 In the event that an issue cannot be resolved between the author and reviewer, that issue is brought before the peer review chairperson.

4.5.3 If the resolution cannot be reached at this level, it may be necessary to raise the issue to a third party. To that end, the following comment/resolution process has been established.

4.5.3.1 The **author** and **peer reviewer chairperson** shall work together to resolve all issues.

4.5.3.2 If an issue(s) remains unresolved, the **author** and the **peer review chairperson** shall then bring the unresolved issue(s) to the attention of the ER Project team leader. The **team leader** then brings the issue(s) to the appropriate Focus

Area leader, who then puts the issue(s) on the agenda for the next Project Management Team (PMT) meeting.

4.5.3.3 At this PMT meeting, the **author** and the **peer review chairperson** shall introduce the topic, and the **PMT** shall discuss and resolve the issue(s).

4.5.3.4 After the PMT has resolved the issue(s) in question, the **author** shall then continue the peer review process as outlined in this QP.

5.0 RECORDS

Note: The **author** is responsible for submitting the following records (processed in accordance with QP-04.04, Record Transmittal to the Records Processing Facility) to the Records Processing Facility. Copies of these records will be retained for the peer review task leader's file.

5.1 Completed ER Project Document Signature Form (see QP-04.09, Document Development and Transmittal Process: Peer Review Required.

5.2 Revised and approved copy of the document.

6.0 TRAINING

6.1 All users of this QP are trained by reading the procedure, and the training is documented in accordance with QP-02.02, Personnel Orientation and Training (and is documented appropriately in the ER Project Training Database [<http://erinternal.lanl.gov/Training/Training.asp>]).

6.2 The **ER Project Team Leader** will monitor the proper implementation of this procedure and ensure that relevant team members have completed all applicable training assignments in accordance with QP-02.02, Personnel Orientation and Training.

7.0 ATTACHMENTS

Attachment A: Peer Review Request Form (2 pages) located at

<http://erinternal.lanl.gov/Quality/user/forms.asp>.

Attachment B: Peer Review Comment/Resolution Form (2 pages) located at

<http://erinternal.lanl.gov/Quality/user/forms.asp>.

Attachment C: Peer Review Comments/Resolution Instructions (2 pages)

Peer Review Request Form

Page 1 of 2

1.0 Request for Peer Review

Date:

Requestor (must be a Team Leader):

Point of Contact:

Preferred date for peer review: First choice:

Second choice:

Document Title:

Type of review (please check all that apply): ☐ Read ☐ Panel ☐ Decision ☐ RFI report ☐ SAP
☐ VCA ☐ CMS ☐ Policy Paper ☐ SOP ☐ QP ☐ SOW ☐ FIP Other (specify):

Deliverable due date to DOE:

NMED:

Other (specify organization):

List PRS, QP, or SOP number(s) addressed in the decision/document to be reviewed:

Author/Presenters:

List technical team statistician, risk assessor (human health and ecological), geologist, hydrologist, and chemist (do not include them as reviewers):

Assigned Reviewers:

Brief description of site/problem (3–4 sentences):

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Peer Review Request Form

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2.0 Please Answer the Following Questions to Help Us Expedite Your Peer Review.

Yes	No	Don't Know	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are radionuclides present or thought to be present?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are bioaccumulators suspected or known to be present?
List major contaminants anticipated or known to occur:			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is ground water of potential concern?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Is surface water of potential concern?
SOP – 2.01 Score:			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has eco scoping been completed?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are sites in this decision/document in proximity of other major contaminant sources?
What is the major driver for decisions? <input type="checkbox"/> Human Health Risk <input type="checkbox"/> Ecological Risk <input type="checkbox"/> Surface Water <input type="checkbox"/> Off-site migration potential <input type="checkbox"/> Quality Management Program requirement Other (specify):			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are field analytical techniques used or proposed?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are any non-routine analytical procedures used?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does the report discuss any modeling results?
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Has NMED or the public raised any particular issues related to this site? If yes, briefly describe:
List and briefly describe any particular concerns or problems you wish reviewers to address: (Any decisions that you are having trouble making should be included):			
Recommended personnel for the peer review:			
<div style="border-bottom: 1px solid black; height: 20px; width: 100%;"></div>			
Peer Review Task Leader Approval Signature/Date			
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Peer Review Comment/Resolution Form

Page 1 of ____

Part 1 (to be completed by the Peer Review Task leader)

Date: _____

Title: _____ ER Doc. Catalog #. ER2 _____ - _____ Rev. #: _____

Reviewer's Name (Print): _____ Group: _____ MS: _____ Comments are due by: _____ (Date)

Author's Name (Print): _____ Phone: _____ FAX: _____

Peer Review Task leader (print): Cheri Vidlak Phone: 667-2728 Fax: 665-4747

Part 2 (to be completed by the Reviewer and Author as appropriate)

Received on (Date): _____ Review completed on: _____ Signature (sign after final resolution has been made): _____

Comment #	Location ¹	M/O ²	Reviewer's Comment/Suggestion	A/R ³	Preparer's Proposed Revision/Resolution	Final Resolution

¹page, paragraph, line ²M = mandatory / O = optional ³A = accept / R = reject

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Peer Review Comment/Resolution Form (continued)

Page __ of __

Title: _____ Reviewer: _____

Comment #	Location ¹	M/O ²	Reviewer's Comment/Suggestion	A/R ³	Preparer's Proposed Revision/Resolution	Final Resolution

¹page, paragraph, line

²M = mandatory / O = optional

³A = accept / R = reject

QP-3.5

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Peer Review Comment/Resolution Form Instructions

Part 1 (to be completed by the Peer Review Task Leader and author as appropriate):

- 1) **Date:** enter date on which comment/resolution form was distributed.
- 2) **Title:** enter decision/document title.
- 3) **Comments are due by:** enter date all comment sheets are to be returned to the Peer Review Task Leader.
- 4) **Author's name:** enter full name of document author
- 5) **Phone:** enter author's phone number
- 6) **Fax:** enter author's fax number
- 7) **Peer Review Task Leader:** enter full name of Peer Review Task Leader
- 8) **Phone:** enter Task Leader's phone number
- 9) **Fax:** enter Task Leader's fax number
- 10) **Reviewer's name:** enter your (the reviewer's) full name.
- 11) **Group:** enter title of your (the reviewer's) Focus Area, Team, Department, Company, etc.
- 12) **MS:** enter your (the reviewer's) Mail Stop number.
- 13) **ID #:** enter tracking number assigned to the decision/document (see QP-4.9 Document Development and Approval Process: Peer Review Required).
- 14) **Revision #:** enter revision number (i.e., 0, 1, 2, etc.—for draft copy enter draft A, draft B etc.).

Table Heading (on p. 2 of form—to be completed by the peer reviewer):

- 1) **Title:** enter decision/document title.
- 2) **Reviewer:** enter your full name.

Part 2 (to be completed by the peer reviewer or author, as appropriate):

- 1) **Received on:** enter date you (the reviewer) received your electronic copy of the decision/document under review and this peer-review Comment/Resolution Form.
- 2) **Review completed on:** enter date you (the reviewer) completed your review of the decision/document and submitted the filled-out peer-review Comment/Resolution Form to the Peer Review Task leader for compilation and transmittal to the author.
- 3) **Signature:** enter your (the reviewer's) signature on the peer-review Comment/Resolution Form.

Important: The reviewer should only sign the printed form after all comments/resolutions have been addressed and satisfactorily resolved in the document and those resolutions have been entered on the form.

- 4) **Comment #:** the reviewer enters a sequential number for each new comment.
- 5) **Location:** the reviewer enters the location in the document on which he or she is commenting (e.g., page 1, paragraph 3, line 10). If desired, the reviewer may also note the document's chapter, section, and/or subsection.
- 6) **Mandatory/Optional:** the reviewer enters M or O as she or he determines the level at which the comment must be addressed.
- 7) **Reviewer's Comment/Suggestion:** the reviewer enters his or her comment or suggestion.

Important: To enable the author to effectively respond to your comment, you must provide author with an entry that is informative and which addresses the issue completely (e.g., identify references that address the issue, name the oversight requirements which make a change necessary, enter a complete statement to justify editorial changes that are recommended, etc.). Statements and questions that do not enable the author to properly address the issues shall not be entered.

- 8) **Accept/Reject:** after reviewing the comment or suggestion, the **author** determines if the decision/document should be revised to reflect the input. If the comment or suggestion is accepted enter an "A" in this column and move on to the next itemized comment. If the comment or suggestion is rejected, enter an "R" in the column and you must enter your position for doing so (see item 9).
- 9) **Author's Proposed Revision/Resolution** (see item 8): the **author** enters his or her resolution to the reviewer's comment/suggestion.
- 10) **Final Resolution (author/reviewer):** the **author** enters the agreed upon resolution to the reviewer's comment.

Important: If the comment was marked as "mandatory" by the reviewer and "rejected" by the author, a resolution (i.e., satisfactorily negotiated between the reviewer and the author, resolved at the direction of the panel chairperson, or resolved according to the process outlined in Section 4.5 of this QP) must be entered in this column or the review process is incomplete.